



## RECORDATION FORM COVER SHEET PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

<b>1. Name of conveying party(ies)</b>  WLD, LLC		<b>2. Name and address of receiving party(ies)</b>  Name: <u>WLD, LLC</u> Internal Address: _____  Street Address: <u>815 Elm Street, Ste. 5B</u>  City: <u>Manchester</u>  State: <u>New Hampshire</u>  Country: <u>U.S.A.</u> Zip: <u>03101</u>	
<b>3. Nature of conveyance/Execution Date(s):</b>  Execution Date(s) _____  <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Joint Research Agreement <input type="checkbox"/> Government Interest Assignment <input type="checkbox"/> Executive Order 9424, Confirmatory License  <input checked="" type="checkbox"/> X Other <u>Change of Assignee's address</u>		Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>4. Application or patent number(s):</b>  A. Patent Application No.(s)  <u>10/717,752</u>		<input type="checkbox"/> This document is being filed together with a new application.  B. Patent No.(s)  Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>5. Name and address to whom correspondence concerning document should be mailed:</b>  Name: <u>David L. Feigenbaum</u> Internal Address: <u>Fish &amp; Richardson P.C.</u>  Street Address: <u>P.O. Box 1022</u>  City: <u>Minneapolis</u> State: <u>MN</u> Zip: <u>55440-1022</u>  Phone Number: <u>(617) 542-5070</u> Fax Number: <u>(617) 542-8906</u> Email Address: <u>feigenbaum@fr.com</u>		<b>6. Total number of applications and patents involved:</b> <u>1</u>  <b>7. Total fee (37 CFR 1.21(h) &amp; 3.41) \$ <u>40.00</u></b> <input type="checkbox"/> Authorized to be charged by credit card <input checked="" type="checkbox"/> X Authorized to be charged to deposit account <input type="checkbox"/> Enclosed <input type="checkbox"/> None required (government interest not affecting title)	
<b>8. Payment Information</b>  a. Credit Card Last 4 Numbers _____ Expiration Date _____  b. Deposit Account Number <u>06-1050</u> Ref. Atty. Dkt. No.: <u>16076-002002</u> Authorized User Name _____			
<b>9. Signature:</b>   Signature		<u>12/20/06</u> Date	
David L. Feigenbaum, Reg. No. <u>30,378</u> Name of Person Signing		Total number of pages including cover sheet, attachments, and documents: <u>1</u>	

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1460, Alexandria, V.A. 22313-1460



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Timothy L. Coder et al.  
 Serial No. : 10/717,752  
 Filed : November 19, 2003

Title : AUTOMATIC WIRE LUBRICATING DEVICE

Art Unit : 3682  
 Examiner : David Morgan Fenstermacher  
 Confirmation No.: 8764  
 Notice of Allowance Date: September 21, 2006

**MAIL STOP ISSUE FEE**

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

**RESPONSE TO NOTICE OF ALLOWANCE**

In response to the Notice of Allowance mailed September 21, 2006, enclosed are a completed issue fee transmittal form PTOL-85b and a check for \$1030 for the required issue fee and publication fee, including patent copies. Also enclosed is a copy of the Recordation Form Cover Sheet as sent to the recordation branch on this day to change the assignee's address.

Please apply any additional charges or credits to our deposit account 06-1050, attorney docket 16076-002002.

Respectfully submitted,

Date: 12/20/06

David L. Feigenbaum  
 Reg. No. 30,378

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 21516485.doc

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL**

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

12/20/06  
 Date of Deposit

Jamie Kelaher  
 Signature

Jamie Kelaher  
 Typed or Printed Name of Person Signing Certificate